The Enlightenment of Japan's Long-term nursing Insurance System to China's Elderly Care Management

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Abstract—Japan has become one of the countries with the most severe population aging in the world. This paper studies the construction and development of Long-term nursing insurance system in Japan under the "aging" society, and through the comparison of the current situation of Long-term nursing insurance in China and Japan, it provides reference guidance for China in the aging stage of population to improve the elderly care and nursing management innovation.

Keywords—ageing, Long-term nursing insurance, Japan, China

I. INTRODUCTION

Since the 1950s, the number of the elderly population in many countries (regions) in the world has been increasing, so the care of the elderly and other related issues have attracted people's attention. In this context, products such as Long-term nursing insurance for the elderly have emerged. As one of the countries with the most severe population aging in the world, Japan has established a Long-term nursing insurance management system that meets the needs of the elderly group. At present, China is facing the problem of aging population, which not only hinders the steady development of national economy, but also threatens social labor force, material resources, ecological environment and other planning. In this regard, China can learn from the successful experience of Japan and establish a Long-term nursing insurance management system in line with China's national conditions, which can not only solve the various difficulties faced by the aging population, but also further adjust China's social security management system to achieve a policy and strategic "win-win".

II. ESTABLISHMENT AND REFORM OF LONG-TERM NURSING INSURANCE SYSTEM IN JAPAN

A. Establishment and Dispute of Long-term Nursing Insurance System in Japan

The establishment of Long-term nursing insurance system in Japan stems from the aging population and the formation of a new family model. The establishment of the Japan's Long-term nursing insurance system in the following six stages: before the 1960's and the start of the "elderly welfare policy", "the elderly health care costs increase stage" in the 1970's, 1980's "in the hospital and stay in bed for the elderly cause social problems", in the 1990's "the preparation of the nursing care insurance system", in the 2000's "care insurance system and the implementation of the revised stage" and the 2010's "super aging social care insurance system under the stage".

Japanese long-term care insurance system has its unique concept and connotation. From the concept connotation, Long-term nursing insurance system is defined as insurance, mainly composed of the insurer and the insured. The insurer of the nursing insurance is "the prefectural government", insurant is set to be the dweller inside Japan of 40 years old of above. The insured is divided into two groups, see table 1 for details.

<table>
<thead>
<tr>
<th>Insured no. 1</th>
<th>Insured no. 2</th>
</tr>
</thead>
<tbody>
<tr>
<td>object</td>
<td>Age 65 and older</td>
</tr>
<tr>
<td>Having the right to pay</td>
<td>Regardless of the cause, caregivers are needed</td>
</tr>
<tr>
<td>Premium burden</td>
<td>city, town, village</td>
</tr>
</tbody>
</table>

Source: akira mercer et al., the social security system and financial management, feige 2006, pp.181.

There are many kinds of nursing services provided by the insurer "city, town, village" to the insured "domestic residents over 40 years old in Japan", as shown in table 2.
B. Reform of New Nursing Service System in Japan

In response to the above disputes, the Japanese government has carried out corresponding reforms to the Long-term nursing service system. In 2012, the Japanese government proposed a new type of care service that integrates residential, medical, nursing, prevention, and life support services -- a development strategy for regional care service systems. The regional including nursing service system is a nursing service developed by the local governments of prefectures, cities, towns, and villages based on the autonomy and subjectivity of each region and based on the actual local conditions. The "Report of the Regional Including Nursing Research Association(March 2013)" issued by the Ministry of Health, Welfare and Labor of Japan stipulates the four elements of the regional inclusive nursing service system. They are living environment, life support, welfare services, nursing, medical, prevention, and choice of oneself and family. The main activities of the regional support centers include: nursing prevention management business; Integrated consulting support services; Rights advocacy business; Integrated and continuous nursing management support business. In addition, there are regional care meetings organized by regional organizations including support centers. There are mainly three types of meetings: individual case meetings, regional meetings for everyday life, and city–village or region-wide meetings. They complement each other and are a way to achieve a regional care service system.

III. THE CHARACTERISTICS OF JAPANESE LONG-TERM NURSING INSURANCE MANAGEMENT: A COMPARISON WITH CHINA

By comparing the current situation of long-term nursing insurance management between China and Japan, we find out the difference between the government behavior, the content of insurance service, the construction of service structure and the training of professional nursing personnel, so as to provide experience for China to build long-term nursing insurance system.

A. The Government Promulgated the National Unified Long-Term Nursing Insurance System

At present, Japan has a complete nursing system from the central to the local - "The Nursing Insurance Law", the details of which are also mature norms. Comparatively speaking, China has not formed the national unified Long-term nursing laws and regulations for the elderly. For the nursing of the elderly, many people still have the traditional concept of raising children for their old age, so the vast majority of people still stay in the thinking mode of mainly taking care of their families and occasionally hiring temporary nursing workers, while the social welfare nursing institutions for the elderly only serve as the auxiliary form of elderly care.

B. The Content of Nursing Insurance Services is Clear and the Projects are Diversified

Since Japan began to implement the long-term nursing insurance system in 2000, the state has made clear regulations on the content of nursing services. The government divides the nursing insurance service into nursing service and nursing prevention service. Among them, nursing services mainly include home care services, professional nursing services, regional intensive care services, welfare resources and residential renovation services; Nursing prevention services mainly include

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**TABLE 2. SERVICES PROVIDED BY INSURERS**

<table>
<thead>
<tr>
<th>Preventive payment services</th>
<th>Care payment service</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nursing and prevention services: door-to-door nursing, door-to-door care, outpatient nursing, outpatient medical guidance, welfare equipment borrowed, etc.</td>
<td>Home services: home nursing, home care, outpatient care, outpatient medical guidance, short-term admission, welfare equipment borrowed, etc. Facilities and services: special care homes for the aged, elderly health facilities, nursing and convalescent medical facilities.</td>
</tr>
</tbody>
</table>

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**TABLE 3. FINANCIAL RESOURCES FOR NURSING INSURANCE**

<table>
<thead>
<tr>
<th>The burden of paying is 90 percent</th>
<th>10% user burden ratio</th>
</tr>
</thead>
<tbody>
<tr>
<td>Public expense 50%</td>
<td>Central 25%</td>
</tr>
<tr>
<td></td>
<td>fixed ratio 20%</td>
</tr>
<tr>
<td></td>
<td>Adjusted delivery fee of 5%</td>
</tr>
<tr>
<td>The insurance premium 50%</td>
<td>the prefectural government 12.5%</td>
</tr>
<tr>
<td></td>
<td>The town government 12.5%</td>
</tr>
<tr>
<td></td>
<td>The premium for no. 1 insured is 19%</td>
</tr>
</tbody>
</table>

Source: according to the official website of the ministry of health and labor, data compilation, website: [www.mhlw.go.jp/topics/kaigo/gayio/hoken_09.html](www.mhlw.go.jp/topics/kaigo/gayio/hoken_09.html).

The Japanese long-term nursing insurance system has not been easy in the process of construction. First, there is controversy about the way in which care security is provided. The nursing guarantee system is to adopt the insurance method, or to expand the level of public expense burden to run. Second, the specific content of the nursing insurance system is controversial. Among them, the two most controversial questions are: First, how much should the overall scope of nursing insurance be, that is, which level of government should bear the insurance? The second is the problem of cash payment for home care. Is the home service provided by the family the object of insurance payment?
visiting services, daycare services, small-scale multi-functional home care and prevention services, and nursing and prevention daycare services for patients with Alzheimer's disease. These diversified nursing services can satisfy the insured with different needs to the greatest extent, so that the insured can receive professional and reasonable nursing services no matter he chooses to stay at home or to work in a professional institution. China, however, the nursing service is still in a relatively single mode, the main nursing contents still stays in the care of the elderly's daily life, diet, and basic aspects, such as cleaning and hygiene is very difficult to provide professional health care, rehabilitation training and nursing home renovation, leasing nursing tools such as nursing service.

C. Nursing Services are Numerous and Specialized

With the development of the diversity of Japanese nursing service content, its nursing service organization also presents a trend of large-scale quantification and specialization. The Japanese government has vigorously encouraged the inflow of private capital through the implementation of various preferential policies. Compared to Japan, the number of nursing services in China is seriously insufficient. According to statistics from the Ministry of Civil Affairs, in 2010, there were only 39,904 social welfare institutions for the elderly nationwide, and only 2,426 million people were able to be adopted by relevant old-age care and welfare institutions to receive old-age care services. In 2010, the actual number of people using care services in Japan was 4.928 million, of which more than 1 million people received care services in professional institutions. While the number of people receiving care in professional care institutions is less than in China, the overall population base shows that the average person receiving care in Japan is much higher than in China.

D. Unify the Qualifications of Nursing Personnel and Obtain a Certificate after Training

In order to ensure the number and quality of professional nursing staff, the Japanese government has made great efforts to improve the working environment of nursing staff, increase their salary, standardize the training system and unify their professional qualifications. It is required that every nurse must hold a certificate and master every nursing knowledge and skill. There is no national test for nursing knowledge and skills. Many nursing staff management is not standardized, nursing staff lack of certain medical knowledge, their level of care is uneven, the overall quality of nursing staff is generally low, nursing skills need to be improved. At present, due to the absence of unified nursing management system, single nursing service content, insufficient number of nursing institutions and unprofessional nursing staff in China, it is difficult to fundamentally alleviate the increasingly serious elderly nursing management problems.

IV. IMPLICATIONS FOR THE MANAGEMENT OF ELDERLY CARE IN CHINA

A. Establish and Improve Relevant Legal System

In order to cope with the aging population, Japan has introduced a series of laws and regulations on the Long-term nursing insurance system. China should combine its national conditions and divide the development of the elderly care insurance industry into three stages.

- the first stage, some economically developed regions take the lead in launching and developing commercial Long-term nursing insurance products to meet the nursing needs of some elderly people.
- the second stage, the mode of gradually combining commercial nursing insurance with social nursing insurance is adopted for other economically developed regions to expand the scope of nursing insurance objects.
- The third stage, with the continuous development of care insurance as well as people's economic strength and improvement of living standards, set by the central government unified care insurance related law is the elderly care insurance law “, and further consummates our country social endowment security system, and according to the provisions of the law to carry out the social Long-term nursing insurance business.

B. Build a Nursing Model with Home Care Service as the Focus and Social Service as the Support

Although there are many kinds of long term care insurance services in Japan, home care service is still the focus of the development of care insurance services in Japan. Japan's home care service is not isolated, it has nursing institutions and a variety of non-governmental organizations and other social service factors support. Among them, social service institutions provide diversified services, such as visit nursing, meal delivery service, day care, rehabilitation training, etc., which not only provide home care services for the elderly living alone, but also can reduce the pressure of nursing members in the elderly family. China should learn from Japan's advanced experience and work on increasing government funding and diversifying community service subjects. As a result, nursing service providers not only have various social welfare legal persons, but also non-profit organizations, local autonomous public organizations and private enterprises.

C. Attach Importance to Disease Care and Prevention

In the fifth year of the implementation of the Long-term nursing insurance system (i.e. 2005), the Japanese government shifted its development focus to the disease prevention system. In 2011, according to the actual situation, the establishment of a new type of nursing prevention daily life support integrated service system. This can not only extend the healthy period of the elderly, shorten the time to receive nursing services, but also reduce the pressure of nursing service institutions and nursing staff, strengthen the effective use of social resources. The Chinese government should also gradually shift the focus of the development of nursing insurance management from disease treatment to disease prevention and from nursing services to nursing prevention. And develop the corresponding prevention system, the construction of prevention service institutions,
increase the prevention of knowledge publicity and lectures, in coordination with health departments, welfare departments and other forces, improve the disease and nursing prevention system.

D. Strengthen Regional Support and Preferential Policies of the Government

The Japanese government attaches great importance to the situation of relatively backward areas and low-income elderly people and alleviates the pressure on some local governments and low-income elderly people through transfer payments. On the one hand, it sets up national adjustment payment in the financing structure of nursing insurance to balance the burden of nursing expenses of different regions and low-income elderly people. On the other hand, the Japanese government also gives different preferential policies and exemptions to low-income elderly people according to their specific income. Here, China can learn from the plan proposed by the Japanese government to set different levels for poor areas and low-income groups, and provide different levels of relief policies to reduce their burden of expenses. In addition, in order to alleviate the financial pressure of the government, some preferential policies can be used to encourage more private funds to be invested in the construction of nursing service institutions.

E. Establish Sound Information Network Resources

Japan has established a complete information network system in the process of implementing the long term care insurance system. When applying for and recognizing, the applicant shall submit the application materials and input the relevant information into the database for system authentication. After the recognition, when the nursing level and service content are formulated, the status of the user's physical condition and service acceptance are sorted out, and personal files are established to ensure that the user receives the corresponding nursing service within a certain period of time and to ensure the re-identification process after half a year. China should strengthen the construction of information network of nursing insurance management, and establish personnel management database for the insured and service users of nursing insurance to improve service efficiency and accuracy.

F. Comprehensiveely Improve the Comprehensive Ability of Nursing Staff

In the process of implementing the long term care insurance system in Japan, the leading position and professional quality of nursing staff play a crucial role. The Japanese government ascribe the final decision right of nursing service identification to the nursing staff, which fully reflects the ownership status of nursing staff in the nursing insurance system. At present, the overall quality and working skills of the existing nursing staff in China are generally low, and a large number of multifaceted and comprehensive nursing talents are needed to vigorously develop the nursing career for the elderly. At the present stage, it is required that China should establish professional training mechanism for nursing staff as soon as possible, hold regular lectures on professional knowledge, improve the professional qualification examination system, strictly require employment certificates, and cultivate various nursing talents required by different nursing services.

V. CONCLUSION

China is in a stage of large population base and rapid growth of elderly population. How to guarantee the living standard of Chinese elderly people and the quality of service in the stage of old-age care is one of the primary problems to be solved in China. Through the research, it is found that China's pension industry must optimize the industrial structure and effectively integrate the home-based pension and institutional pension modes, so as to further improve the overall well-being of the elderly and create a more superior living environment for the elderly in the community. Optimizing the structure of the old-age care industry is an economic decision, which depends on the macro-control functions of the state and local governments, and adopts the regulation method according to the actual needs of the old-age care population to solve the deficiencies of the traditional old-age care service model. The government's functions in elderly care services have not been fully played, which has become a key standard affecting the well-being index of the elderly. All these will hinder the sustainable development of China's elderly care industry and affect the quality of life of the elderly.

REFERENCES